

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 8

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**The Thomas Mills Committee**

Full Name (Last, First, Middle Initial)

**Thomas Mills**

Mailing Address 1301 N Greensboro St

City

Carrboro

State

NC

Zip Code

27510-1311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Consultant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1740.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		21		2015

Transaction ID : VR0R3F2TEZ8

Amount of Each Receipt this Period

1740.00

\* In-Kind: Filing Fee

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1740.00

1740.00